Form 1040 CEZ

SCHEDULE C-EZ (Form 1040) Department of the Treasury Internal Reviews Cereica	Net Profit From Business (Sole Proprietorship) ► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B. ► Attach to Form 1040, 1040NR, or 1041. ► See instructions on back.							2007 Attachment Sequence No. 09A					
Name of proprietor			Soc	lai seci									
Part I General	Information												
You May Use Schedule C-EZ Instead of Schedule C Only If You:	Had business expenses of \$5,000 or less. Use the cash method of accounting. Did not have an inventory at any time during the year. Did not have a net loss from your business. Had only one business as either a sole proprietor or statutory employee.	less. Use the cash method of accounting. Did not have an inventory at any time during the year. Did not have a net loss from your business. Had only one business as either a sole proprietor or statutory Are not required to fi Depreciation and Am this business. See the for Schedule C, line C-4 to find out if you. Do not deduct experbusiness use of your business use of your passive activity losss											
A Principal business	or profession, including product or service		В	Enter co	de fr	om pag	es C-	1, 9, 8	10				
C Business name. If	no separate business name, leave blank.		D	Employ	ner II) numb	ner (E	3005 1	l anv				
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City, town or post	(including suite or room no.). Address not required if same as on page office, state, and ZIP code four Net Profit	a 1 or your tax	recurr						_				
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Schedule C-EZ (Form 1040) 2007 Page 2

Instructions



Before you begin, see General Instructions in the 2007 Instructions for Schedule C.

You can use Schedule C-EZ instead of Schedule C if you operated a business or practiced a profession as a sole proprietorship or you were a statutory employee and you have met all the requirements listed in Schedule C-EZ, Part I.

Line A

Describe the business or professional activity that provided your principal source of income reported on line 1. Give the general field or activity and the type of product or service.

Line B

Enter the six-digit code that identifies your principal business or professional activity. See pages C-8 through C-10 of the instructions for Schedule C for the list of codes.

Line D

You need an employer identification number (EIN) only if you had a qualified retirement plan or were required to file an employment, excise, estate, trust, or alcohol, tobacco, and firearms tax return. If you need an EIN, see the Instructions for Form SS-4. If you do not have an EIN, leave line D blank. Do not enter your SSN.

Line E

Enter your business address. Show a street address instead of a box number. Include the suite or room number, if any.

Line 1

Enter gross receipts from your trade or business. Include amounts you received in your trade or business that were properly shown on Forms 1099-MISC. If the total amounts that were reported in box 7 of Forms 1099-MISC are more than the total you are reporting on line 1, attach a statement explaining the difference. You must show all items of taxable income actually or constructively received during the year (in cash, property, or services). Income is constructively received when it is credited to your account or set aside for you to use. Do not offset this amount by any losses.

Line 2

Enter the total amount of all deductible business expenses you actually paid during the year. Examples of these expenses include advertising, our and truck expenses, commissions and fees, insurance, interest, legal and professional services, office expenses, rent or lease

expenses, repairs and maintenance, supplies, taxes, travel, the allowable percentage of business meals and entertainment, and utilities (including telephone). For details, see the instructions for Schedule C, Parts II and V, on pages C-4 through C-8. If you wish, you can use the optional worksheet below to record your expenses. Enter on lines b through I the type and amount of expenses not included on line a.

If you claim car or truck expenses, be sure to complete Schedule C-EZ, Part III.

Line 5b

Generally, commuting is travel between your home and a work location. If you converted your vehicle during the year from personal to business use (or vice versa), enter your commuting miles only for the period you drove your vehicle for business. For information on certain travel that is considered a business expense rather than commuting, see the instructions for Form 2106.

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Internal Revenue Code section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated burden for individual taxpayers filing this form is included in the estimates shown in the instructions for their individual income tax return. The estimated burden for all other taxpayers who file this form is approved under OMB control number 1545-1973 and is shown below.

Recordkeeping			-		-	_	-	_	_ 45 min
Learning about the law	,								
or the form			-		-	-	-	-	. 4 min.
Preparing the form			-		-	-	-	-	. 35 min
Copying, assembling,									
and sending the form t	to i	the	IR8	š.,	_	_	_	_	. 20 min

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. See the instructions for the tax return with which this form is filed.

Ξ	Optional Worksheet for Line 2 (keep a copy for your records)								
а	Deductible business meals and entertainment (see page C-6)	а							
b		b							
С		с							
d		а							
u		-							
е		е							
		r							
ı									
g	Total. Add lines a through f. Enter here and on line 2	g							

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